



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 JUL -1 AM 8:45

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Craig Rice Coaching LLC

2. The complete street and mailing addresses of the initial designated office:

12232 West Clover Meadows
(Street Address)

Boise ID 83713
(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Craig Rice
(Name)

12232 W. Clover Meadows
(Street Address)
Boise, ID 83713

4. The name and address of at least one member or manager of the limited liability company:

<u>Name</u>	<u>Address</u>
<u>Craig Rice</u>	<u>12232 W. Clover Meadows Boise, ID 83713</u>
_____	_____
_____	_____
_____	_____

5. Mailing address for future correspondence (annual report notices):

Same

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name:

Craig D. Rice

Signature

Typed Name:

Secretary of State use only
IDAHO SECRETARY OF STATE
07/01/2015 05:00

CK:2070 CT:311974 BH:1482217
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